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\$24.00 a month. The students did not receive this increase immediately, but are being paid now the increase from that date. New students who are entering the School this fall will not receive the increase of \$9.00 a month until the completion of their four months' probationary period.")

#### JOURNALS ON HAND

Dear Editor: I have volumes 1910-1919 of the JOURNAL complete and would be glad to dispose of them. Volumes 1910-1915 are bound.

ELLEN STEWART.

The Tuberculosis League, 2851 Bedford Avenue, Pittsburgh.

#### JOURNALS WANTED

THE AMERICAN JOURNAL OF NURSING needs copies of the JOURNAL for November, 1911, and for January, 1912, to complete a set waiting to be bound. Please send them to the JOURNAL office, 19 West Main Street, Rochester.

NOTE:—A letter from Cedar Rapids, Iowa, cannot be published because the name of the writer does not accompany it.

### ARRANGEMENT OF HOURS OF DUTY FOR TWO NURSES

I.

Dear Editor: I have found that the midnight change for nurses gives each a part of the day for exercise, as so many nurses find it difficult to sleep during the daylight hours. I have had no objection made by family or doctor.

Alabama M. G. W.

II.

Dear Editor: Of course a nurse wishes to please the family and doctor, but my experience has been that they will say, "Arrange the time to suit yourselves." About one nurse out of a hundred really likes night duty; it isn't natural that one should, so why not be considerate of each other by sharing the vigil of the night? It can be done by dividing the time into eight-hour duty which gives each nurse a night's rest every other night and hours for recreation in the sunshine, both essential to keep the nurse interested and alert. If nurses work in harmony, eight-hour duty can be arranged very nicely and is less tiresome than the long stretch of twelve hours.

North Carolina M. A. L. W.

(We understand this correspondent to mean that each nurse would have two eight-hour periods on one day, and one eight-hour period on the succeeding day.—Ed.)

III.

Dear Editor: Having done private duty for twenty years, I have always found it satisfactory for the nurses themselves to arrange hours on duty, the first nurse on the case having the choice of time. The doctor is not acquainted with the routine of the household, and the average patient is not familiar with the arrangement of time off duty for the nurse.

New Jersey M. B.

IV.

Dear Editor: I think it can in most cases be left to the nurses, but I am sorry to say I have found some nurses who are not one bit obliging or reasonable about it. They want either day or night duty. So often a nurse is a poor sleeper in the day time that I think if two nurses have every other night on duty, it seems a good division. This will mean that one nurse is on duty from ten p. m. until eight a. m., and the nurse who comes on duty has had her breakfast and stays until two p. m. The nurse who comes on duty at two p. m. has had her dinner and is off duty until ten p. m. Thus, the family only relieves a nurse for one meal, supper. I had no trouble with this arrangement where I formerly nursed. It evens things up, as every other morning one has the bath to give and the general care of the patient, and has also to give the patient his dinner. However, some nurses have looked with scorn on this programme and have even called it "messy." The patient or the family seldom raise any objection. I think as long as the nurses have to do the work, it should be left to their decision. May I also add that I believe heartily with Z. L., that a nurse should have a cot in the patient's room, even if she does twelve-hour duty.

Massachusetts M. A. M.

## SCARCITY OF PRIVATE DUTY NURSES

Dear Editor: This prosperous community was used before the war to having a special nurse for each case of even moderately severe illness, and since the war so many of our local nurses have married or have accepted institutional positions that we have not enough to supply the demand. So many of the local physicians appeal to this hospital for assistance, which we have always given very freely, in securing special nurses for them, that we keep the remaining nurses of the community constantly busy and are compelled to call for nurses from all cities in a radius of eighty miles. This need for nurses has pressed upon us so heavily that we are impelled to ask the Journal readers to consider this community as a field for their labors.

McKitrick Hospital, Kenton, Ohio

A. S. McKitrick, M.D.

A new hospital for mental diseases is being organized at Marion, Indiana, and will be ready to receive three hundred ex-soldiers early in November. All types of mental disease will be treated. The personnel for the hospital is being selected with great care and a corps of sixty nurses has been authorized. Although the absence of women and children among the patients makes it impossible to give a full training for the degree R.N., well planned courses of training in modern psychiatric nursing will be organized for pupils from affiliating general hospitals and for graduate nurses who desire to secure a training in mental nursing. The occupation and physiotherapy department will also have facilities for practical training, and in the social service department pupils from recognized schools of social work will be given an opportunity for practical experience under supervision. Applications are now being received by Dr. Frank F. Hutchins, Medical Director and Superintendent of the Sanatorium.